	2. m. 1		•	BEST AVAILABLE COPY NO 814 386									
	PATENT /			FEE DETERMINATION RECORD se October 1, 2000					Application or Docket Number				
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY				
TOTAL CLAIMS 20								RATE	FEE	1	RATE	FEE	
FOR			NUMBER	FILED	NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		٠	Ø		X\$ 9=	-	OR	X\$18=		
INE	EPENDENT CL	AIMS	3 mi	nus 3 =	, (	Ø		X40=		OR	X80=		
M	ILTIPLE DEPEN	RESENT	ESENT				+135=		1	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	200	OR	TOTAL		
CLAIMS AS AMENDED - PART II  OTHER 1											THAN		
_	(Column 1) (Column 2) (Column CLAMS HIGHEST							SMALL		OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Totai	. 20	Minus	. 0	20	: /		X\$ 9=	ļ	OR	X\$18≖		
	Independent	. 0	Minus		3	-3		X46£3	129	OR	XBO		
L	HHS1 PHESE	NTATION OF M	ULTIPLE DEI	ENDEN	CLAIM	<u>- L-l</u>	j	+135=		OR	+270=		
								TOTAL ADDIT, FEE	129	OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colu		(Column 3)		AUUII. PEE			ADDIT. PEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 00	Minus	. 4	(1)	-		X\$ 9=		OR	X\$18=		
	Independent	. 6	Minus		2			X40=		OR	X80=		
Ľ	HHS1 PRESE	NIATION OF MI	JUTIPLE DEF	TIPLE DEPENDENT CLAIM			J	+135=		OR	+270=		
							1	TOTAL	•	٠	TOTAL		
	11-28-04	(Column 1)		(Column 2) (Column				ADDIT. FEE		,	ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 20	Minus	• 6	90	•		X\$ 9=		OR	X\$18=		
	Independent	. 0	Minus		b	=/		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							125-					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** ADDITIONS OF ADDITIONS												$\vdash$	
•••	If the "Highest Nut	nber Previously Pa mber Previously Pa ber Previously Pai	sid For IN THE	S SPACE	is fess tha	n 3, entar "3."	. '	NDDIT. FEE	propriate box	OR	ADDIT: FEE		